

Walton EMC Charity Donation Request Form

***Application requirement: To be considered for a donation, your organization must have a physical presence—such as an office or facility—within Walton EMC’s 10-county service area. Organizations without an established location in our service territory are not eligible to apply.**

Donations requests will be considered on a monthly basis. Applying for a donation request does not guarantee fulfillment of request, nor is amount requested guaranteed. Please contact Kathy Ivie at kivie@waltonemc.com with any questions.

Organization _____

Organization Website _____

County/Countries Served _____

Contact Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Phone Number _____ E-Mail _____

Donation Amount Requested \$ _____

Describe the purpose of the donation: _____

Has Walton EMC donated to your organization in the past? YES / NO

If yes, when and how much? (Please include donations from Walton EMC charities, Walton EMC Corporate donations and Operation Round Up) : _____

List any additional relevant information/comments: _____

If different from above, please provide the name in which the check should be payable to and the address in which it should be mailed: _____

**Please attach any supporting documents*

Signature: _____ Date: _____